

**Application Data Sheet**

**Application Information**

**Application Type::** Regular  
**Subject Matter::** Utility  
**Title::** PERINATAL HYPOXIC-ISCHEMIC BRAIN  
DAMAGE TREATMENT  
**Attorney Docket Number::** 355908-4000  
**Suggested Drawing Figure::** 1  
**Total Drawing Sheets::** 1  
**Small Entity?::** Yes

**Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** USA  
**Status::** Full Capacity  
**Given Name::** Charles  
**Family Name::** Palmer  
**City of Residence::** Hummelstown, PA  
**Country of Residence::** USA  
**Street of mailing address::** 660 Appenzell Drive

**Correspondence Information**

**Correspondence Customer Number::** 38706  
**E-Mail address::** PTOMailSiliconValley@foley.com

**Representative Information**

<b>Representative Customer Number::</b>	38706	
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### Domestic Priority Information

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	An application claiming the benefit under 35 USC 371	PCT/US2004/023509	7/20/2004
This Application	An application claiming the benefit under 35 USC 119(e)	60/489,198	7/21/2003
This Application	An application claiming the benefit under 35 USC 119(e)	60/527,056	12/3/2003

### Assignee Information

**Assignee Name::**

Vasogen Ireland Limited